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PTO/SB/81 (01-06)

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INDICATION FORM**

Application Number	10/611605
Filing Date	7/1/2003
First Named Inventor	Coker, Don
Title	System and Method for Preaching...
Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	Coker 001

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

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Name	Registration Number
Caroline Coker Coursey	50,516

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Firm or Individual Name: **Don Coker**

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature: **Don Coker** Date: **Jan. 9, 2007**
 Name: **Don Coker** Telephone: **770-852-2286**
 Title and Company: **(an individual)**

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of **1** forms are submitted.

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